FILE NOW: FILING FEE AFTER MAY 1 IS $

PROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JAN 30 PM 1:44

DOCUMENT # P01000064845

1. Corporation Name

4-U DISTRIBUTORS, INC.

REINSTATEMENT 03-04

Principal Place of Business	Mailing Address
6850 Coral Way #205 Miami, Fl. 33155	6850 Coral Way #205 Miami, Fl.33155

3. Date Incorporated or Qualified: 6/28/01
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 638 E 9 Street	26 P.O. Box 111291
Suite, Apt. #, etc. 22 --	Suite, Apt. #, etc. 27 --
City & State 23 Hialeah, Fl.	City & State 28 Hialeah, Fl.
Zip 24 33010 / Country 25 USA	Zip 29 33011 / Country 30 USA

4. FEI Number: 20-0647601 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CARLOS M. RODRIGUEZ
2280 W. 74 PL
Hialeah, Fl.33016

10. Name and Address of New Registered Agent

81 Name: Alberto Lemus
82 Street Address (P.O. Box Number is Not Acceptable): 638 E. 9 Street
83
84 City: Hialeah, — 85 Zip Code: FL 33010

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Alberto Lemus — DATE: 1/22/04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Carlos M. Rodriguez 2280 W 74 Pl Hialeah,Fl.33016	☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	PD Alberto Lemus 638 E 9 Street Hialeah,Fl 33010 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Sergio Mannise 2280 W 74 Pl Hialeah,Fl 33016	☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	10002832367 1 02/06/04--01026--021 **300.00 10002832367 1 02/06/04--01026--022 **150.00 — ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Alberto Lemus 1/22/04 (305)883-9688
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-U DISTRIBUTORS, INC.
638 E 9 STREET
HIALEAH, FL 33010

Miami, January 22, 2004

Division of Corporation
Uniform Business Report
P.O. Box 1500
Tallahassee, Fl 32302-1500

Dear Sir:

This letter is to inform you that we never received the original form to be file before May 1st. I will appreciate very much if you received and accept our payment in the amount of $ 300.00 as payment of the Corporation Uniform Business Report for year 2002 & 2003. As you can see we move our office to: 638 East 9 Street, Hialeah, FL 33010.

I appreciate your help to resolve this matter.

Sincerely your:

Alberto Lemus
President/Director